



K-12 School Guidance for COVID-19 (Updated 02/16/2021)

This guidance outlines mitigation recommendations for K-12 schools to prepare for and respond to community spread of coronavirus disease-2019 (COVID-19) based on <u>CDC mitigation strategies</u>. Guiding principles specific to Maricopa County include the following:

- Maricopa County Department of Public Health (MCDPH) has partnered with school districts and vaccine
 vendors to ensure that every Maricopa County school staff person working with public, private and
 charter schools has been offered COVID-19 vaccination in the early part of prioritized Phase 1B. The first
 dose will be offered to everyone by February 22, 2021 and the second dose by April 4, 2021.
- All students who are either at high risk for severe COVID-19 or live with someone who is at high risk for severe COVID-19 should be offered the opportunity to continue virtual learning.
- Many schools in Maricopa County have successfully implemented a safe hybrid learning scenario with mitigation strategies that include wearing masks at all times, maintaining physical distancing of 6 feet or more to the greatest extent possible, and careful surveillance for COVID-19 cases and outbreaks on a school-by-school level. Schools who have successfully implemented mitigations strategies with hybrid learning scenarios without evidence of sustained COVID-19 spread can continue to operate using their current strategies, as long as this includes wearing masks at all times, maintaining physical distancing of 6 feet or more to the greatest extent possible, and careful surveillance for COVID-19 cases and outbreaks on a school-by-school level.
- The feasibility of weekly screening testing for COVID-19 in Maricopa County schools is unclear at this
 time. This guidance includes CDC recommendations for learning scenarios to schools that choose to
 perform routine COVID-19 screening, however MCDPH does not recommend this strategy as a critical
 component of COVID-19 mitigation in schools.

The operational strategy outlined here includes three essential components:

- 1. <u>Consistent implementation of **five key mitigation strategies** to reduce transmission of SARS-CoV-2 in schools;</u>
- 2. Indicators of community transmission to reflect level of community risk; and
- 3. Phased mitigation and learning modes based on levels of community transmission.

Additional mitigation strategies to consider include:

- 4. Testing to identify individuals with COVID-19 infection to limit transmission and outbreaks; and
- 5. Vaccination for teachers, staff, and communities as soon as supply allows.





1. Mitigation Strategies to Reduce Transmission of SARS-CoV-2 in Schools

Schools should use the **5 key mitigation strategies** outlined below to ensure safe reopening of schools and reduction of transmission of SARS-CoV-2, the virus that causes COVID-19. Schools providing any **in-person instruction** should prioritize **universal and correct use of masks at all times (except when eating) and physical distancing of at least 6 feet to the greatest extent possible**.

Universal and correct use of masks

- o Implement a mask policy for all students, teachers, staff, and visitors to wear a mask throughout the school.
- Educate students, teachers, staff, and families about the <u>most effective masks</u> and how to ensure a proper fit.
 - Cloth masks made from tightly woven cotton or cotton blend in two or three fabric layers that fit snugly to the face are recommended. Exhalation valves or vents and masks that do not properly fit or are made of loosely woven fabrics are not recommended.
- There is a small group of people who cannot safely wear a mask due to a medical condition, behavioral condition or disability. Schools should make individualized determinations as required by Federal disability laws to determine if an exception is necessary and appropriate.

Physical distancing

- Establish school policy and implement structural interventions to promote physical distancing of at least 6 feet between persons to the greatest extent possible. Consider the following:
 - Cohorting: consider creating groups of students, and sometimes teachers/staff, that stay together throughout the school day to minimize exposure to other individuals. Keep cohorts as static as possible.
 - Staggered scheduling: stagger school arrival and drop off times or locations by cohort or put in place other protocols to limit contact between cohorts and direct contact with parents.
 - Alternate schedules with fixed cohorts: to decrease class size and promote physical distancing.
 - Install physical barriers with guides: such as sneeze guards and partitions, particularly
 in areas where it is difficult for individuals to remain 6 feet apart (e.g., reception desks).
 - Limit visitors to essential persons only as much as possible. Require all visitors to wear masks and keep a 6-foot distance from others to the greatest extent possible. Schools should permit non-essential visitors only in areas of low (blue) community transmission.

Handwashing and respiratory etiquette

- Teach children, teachers, and staff proper handwashing with soap and water for at least 20 seconds and increase monitoring to ensure adherence among students. Consider adding this into curriculum in a health or science lesson.
- Encourage students, teachers, and staff to cover coughs and sneezes with a tissue when not wearing a mask and immediately wash hands after blowing their nose, coughing, or sneezing.





- Support healthy hygiene by providing adequate supplies, including soap and a way to dry
 hands, tissues, and no touch trash cans. Alcohol-based hand sanitizer that contains at least 60%
 alcohol can be provided for staff and older children who can safely use it.
- Cleaning and maintaining health facilities: routinely clean high-touch surfaces and make changes to physical space to maintain a healthy environment and facilities
 - Clean frequently touched surfaces such as playground equipment, door handles, sink handles, toilets, and drink fountains within the school and on school buses at least daily or between use as much as possible.
 - Adjust physical layouts in classrooms and other settings to maximize physical space, such as turning desks to face in the same direction.
 - o **Install physical barrier sand provide guides** such as tape on floors and arrows to promote physical distancing and minimize crowding.
 - o **Discourage sharing items**, particularly those that are difficult to clean.
 - o Ensure all water systems and features are safe to use after a prolonged facility shutdown.
 - Close communal use of shared spaces such as dining halls and lunchrooms, if possible, or stagger use and clean between use. Consider using a larger space for instruction to maximize physical distancing.
 - Avoid offering any self-serve food or drink.
 - o **Improve ventilation** to the extent possible by opening windows and doors to increase circulation of outdoor air, while staying consistent with school safety protocols and plans.
- Conduct contact tracing, isolation, and quarantine in collaboration with MCDPH
 - Collaborate with MCDPH for case investigation and contact tracing as outlined in <u>Steps to Take</u>
 if Student or Staff is Diagnosed with COVID-19.
 - Educate teachers, staff, and families about when their child should stay home including <u>isolation</u>
 and <u>quarantine guidance</u> when necessary.
 - Home isolation is recommended for students, staff, and teachers diagnosed with COVID-19.
 - o Reinforce that students, staff, and teachers should not report to school when ill.

2. Indicators of Community Transmission to Reflect Level of Community Risk

The first step in determining when and how to safely reopen schools involves assessing community transmission of SARS-CoV-2, the virus that causes COVID-19. CDC recommends the use of two measures of community burden to determine the level of community transmission:

- 1. Total number of **new** cases per 100,000 persons in the last 7 days; and
- 2. Percentage of nucleic acid amplification tests (NAATs, including PCR) that are positive in the last 7 days.

These measures are used to assess incidence and spread of SARS-CoV-2, the virus that causes COVID-19, in the community, not the school itself. Risk is dependent on community level transmission **and** implementation of school and community mitigation strategies, including all of the five strategies outlined above.

Community transmission in Maricopa County can be found at on the <u>Maricopa County School Dashboard</u>. The dashboard will be updated to reflect CDC's metrics on March 3rd and will continue to be updated weekly.





CDC Indicators and Thresholds for Community Transmission of COVID-19

Indicator	Low Transmission Blue	Moderate Transmission Yellow	Substantial Transmission Orange	High Transmission Red
Total new cases per 100,000 persons in the past 7 days	0-9	10-49	50-99	≥100
Percentage of NAATs (PCR) that are positive during the past 7 days	<5.0%	5.0%-7.9%	8.0%-9.9%	≥10.0%

3. Phased mitigation and learning modes based on levels of community-transmission

Communities should fully implement and adhere to mitigation strategies to reduce COVID-19 incidence to support safely opening schools for in-person learning. Phased mitigation recommendations to assist schools in making decisions in conjunction with monitoring of local community indicators are available for schools, with an emphasis on requiring universal and correct use of masks. The phased mitigation recommendations are presented in Tables 1 and 2 below.

As a reminder, guiding principles specific to Maricopa County include the following:

- All students who are either high risk for severe COVID-19 or live with someone who is at high risk for severe COVID-19 should be offered the opportunity to continue virtual learning.
- Many schools in Maricopa County have successfully implemented a safe hybrid learning scenario with mitigation strategies that include wearing masks at all times, maintaining physical distancing of 6 feet or more to the greatest extent possible, and careful surveillance for COVID-19 cases and outbreaks on a school by school level. Schools who have successfully implemented mitigations strategies with hybrid learning scenarios without evidence of sustained COVID-19 spread can continue to operate using their current strategies, as long as this includes wearing masks at all times, maintaining physical distancing of 6 feet or more to the greatest extent possible, and careful surveillance for COVID-19 cases and outbreaks on a school by school level.
- The feasibility of weekly screening testing for COVID-19 in Maricopa County schools is unclear at this time. This guidance includes CDC recommendations for learning scenarios to schools that choose to perform routine COVID-19 screening, however MCDPH does not recommend this strategy as a critical component of COVID-19 mitigation in schools. Phased mitigation strategies for schools that elect to implement this strategy are presented in Table 2.





Table 1. Recommended Implementation of Mitigation Strategies, Testing, and Safe K-12 School Learning Modes by Level of Community Transmission for Schools that DO NOT Implement Expanded Screening Testing (For schools that choose to perform routine COVID-19 screening, consult Table 2.)

Low Transmission Blue	Moderate Transmission Yellow	Substantial Transmission Orange	High Transmission Red				
All schools: Universal and correct use of masks is required; physical distancing; handwashing and respiratory etiquette; cleaning and maintaining healthy facilities; contact tracing in combination with isolation and quarantine. Diagnostic testing ¹ : Symptomatic students, teachers, and staff and close contacts referred for diagnostic testing							
Diagnostic test	ing . Symptomatic students, teachers, a	Elementary schools in hybrid learning mode or reduced attendance ³ Physical distancing of 6 feet or more, to the greatest extent possible ²					
·	full in-person instruction ore, to the greatest extent possible ²	Middle and high schools in hybrid learning mode or reduced attendance Physical distancing of 6 feet or more, to the greatest extent possible ³	Middle and high schools in virtual-only instruction unless they can strictly implement all mitigation strategies and have few cases. Schools that are already open for in-person instruction with successfully implemented mitigation strategies can remain open, but only if they strictly implement mitigation strategies and have few cases. ⁴				
Sports and extracurricular activities occur; physical distancing of 6 feet or more, to the greatest extent possible ⁵	Sports and extracurricular activities occur with physical distancing of 6 feet or more required	Sports and extracurricular activities occur only if they can be held outdoors, with physical distancing of 6 feet or more	Sports and extracurricular activities are virtual only				

¹Diagnostic testing for SARS-CoV-2 is intended to identify occurrence of SARS-CoV-2 infection at the individual level and is performed on individuals with or without suspected COVID-19 infection in accordance with the test's authorization and labeling. Diagnostic testing includes PCR and antigen tests.

²If physical distancing of at least 6 feet among all students, teachers, and staff within a class, cohort, or pod is not possible at all times, schools should ensure physical distancing between classes, cohorts, and pods.

³Hybrid learning or reduced attendance is intended to maximize physical distance between students. Schools may consider hybrid learning models or instructional modes where substantial percentages of students are in virtual only instruction. At all levels of community transmission, schools should provide families the option to participate in virtual learning if a student or family member is at risk of severe illness from COVID-19. ⁴Strict implementation of mitigation strategies refers to policies that require consistent and correct use of masks, physical distancing of at least 6 feet to the greatest extent possible, and all other key mitigation strategies.

⁵School officials should implement limits on spectators and attendees for sports, extracurricular activities, and school events as consistent with recommendations for masking and physical distancing for each phase.





Table 2. Recommended Implementation of Mitigation Strategies, Testing, and Safe K-12 School Learning Modes by Level of Community Transmission for Schools that Choose to Perform Routine COVID-19 Screening

Low Transmission	Moderate Transmission	Substantial Transmission	High Transmission
Blue	Yellow	Orange	Red

All schools implement 5 key mitigation strategies: Universal and correct use of masks required; physical distancing; handwashing and respiratory etiquette; cleaning and maintaining healthy facilities; contact tracing in combination with isolation and quarantine.

Diagnostic testing¹: Symptomatic students, teachers, and staff and close contacts referred for diagnostic testing

Screening Testing ²							
Routine screening testing of teachers and staff offered once per week							
No screening testing for students	Routine screening testing of students offered once per week ³						
School Status							
K-12 schools open for full in-person instruction		K-12 schools in hybrid learning mode or reduced attendance ⁵					
Physical distancing of 6 feet or more to the greatest extent possible ⁴		Physical distancing of 6 feet or more to the greatest extent possible					
Sports and extracurricular activities occur; physical distancing of 6 feet or more to the greatest extent possible ⁶	Sports and extracurricular activities occur with physical distancing of 6 feet or more required	Sports and extracurricular activities occur only if they can be held outdoors, with physical distancing of 6 feet or more	Sports and extracurricular activities are virtual only				

¹Diagnostic testing for SARS-CoV-2 is intended to identify occurrence of SARS-CoV-2 infection at the individual level and is performed when there is a reason to suspect that an individual may be infected, such as having symptoms or suspected recent exposure. Diagnostic testing includes PCR and antigen tests.

²Screening testing is intended to identify infected asymptomatic individuals who may be contagious so that measures can be taken to prevent further transmission.

³Schools may consider testing a random sample of at least 10% of students or may conduct pooled testing of cohorts/pods for screening testing in areas of moderate and substantial community transmission.

⁴If physical distancing of at least 6 feet among all students, teachers, and staff within a class, cohort, or pod is not possible at all times, schools should ensure physical distancing between classes, cohorts, and pods.

⁵Hybrid learning or reduced attendance is intended to maximize physical distance between students. Schools may consider hybrid learning models or instructional modes where substantial percentages of students are in virtual only instruction. At all levels of community transmission, schools should provide families the option to participate in virtual learning if a student or family member is at risk of severe illness from COVID-19.

⁶School officials should implement limits on spectators and attendees for sports, extracurricular activities, and school events as consistent with recommendations for masking and physical distancing for each phase.





4. Testing to identify individuals with COVID-19 to prevent transmission and outbreaks

Viral testing strategies are critical to a comprehensive mitigation strategy. MCDPH recommends testing **symptomatic** students, staff, and teachers for SARS-CoV-2, the virus that causes COVID-19. At all levels of community transmission, schools should offer referrals to diagnostic testing to any symptomatic student, teacher, or staff member and those with a known exposure to COVID-19. Symptomatic persons should be advised to stay home if sick.

Symptoms to consider for referral for COVID-19 diagnostic testing include:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue (not as a sole symptom in the school setting)
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

Options for testing symptomatic school-affiliated persons in Maricopa County schools include:

- Utilizing a rapid antigen test at the school, if available;
- Referring the symptomatic individual to any Banner Urgent Care for testing; or
 - If this option is chosen, please give this flier (<u>English</u> / <u>Spanish</u>) to the symptomatic individual and ask them to present it to the staff at the Banner Urgent Care facility.
- Seeking testing at any available testing site, which can be found online at the <u>MCDPH Testing Webpage</u> or <u>ADHS</u>
 <u>Testing Webpage</u>.

5. Vaccination for teachers, staff, and communities as supply allows

MCDPH recommends that all teachers and staff who meet eligibility criteria receive the COVID-19 vaccination. Teachers and staff from K-12 schools are eligible and prioritized in Phase 1B for vaccination at this time.

MCDPH has partnered with school districts and vaccine vendors to ensure that every Maricopa County school staff person working with public, private and charter schools has been offered COVID-19 vaccination in the early part of prioritized Phase 1B. The first dose will be offered to everyone by February 22, 2021 and the second dose by April 4, 2021.

- Registration: MCDPH has partnered with local school districts to serve schools within their geographic region.
 Visit the MCDPH Vaccines for K-12 School and Childcare Staff webpage to access the map and contact the school district in which your school geographically falls. Contact the school district that is serving your geographic region using the link within the map or this PDF.
 - A waitlist is available for those who missed the vaccine events in their geographic district and have not received their first dose. Sign up for the waitlist using this survey.





- Those waiting for second dose appointments will be emailed about how and where to schedule your second dose appointment.
- **Verification**: please bring proof of employment, such as an employee ID or pay stub.

6. Additional Resources

- Operational Strategy for K-12 Schools through Phased Mitigation (CDC)
- U.S. Department of Education COVID-19 Handbook: Volume 1
- Online School Reporting Form for COVID-19 cases and exposures in K-12 schools
- Steps to Take if Student or Staff is Diagnosed with COVID-19 (PDF Rev. 12/08/20)
- Quarantine guidance and flow chart for household and close contacts of a person with COVID-19:
 English | Spanish (PDF Rev. 12/02/20)
- Home isolation guidance and flow chart for people who test positive or have symptoms consistent with COVID-19:
 - English | Spanish (PDF Rev. 11/06/20)
- Letter to Healthcare Providers Concerning Children's Illnesses (PDF 10/19/20)
- School & Childcare Child Exposure: English (Word Rev. 02/03/21) | Spanish (Word Rev. 02/03/21)
- School & Childcare Staff Exposure: English (Word Rev. 02/03/21) | Spanish (Word Rev. 02/03/21)
- School Outbreak Notification Letter: English | Spanish (Word Rev. 12/10/20)
- Public Health Statement for Medical Absence: English | Spanish (PDF Rev. 10/15/20)
- Food Services Guidelines for Schools (PDF Rev. 09/08/20)
- School Transportation Guidance (PDF Rev. 09/08/20)
- PPE Infection Control Guidance (PDF Rev. 09/08/20)
- Cleaning and Disinfection in schools (PDF Rev. 09/08/20)
- Symptom Screening in schools (PDF Rev. 08/09/20)